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CONFIRMATION NO. 5531

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10/803,396		422	1797	36572-74643

APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	/PAUL SANG HWA HYUN/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	IN	8	72 19 -5- 1

ADDRESS

CUMMINS, INC.
 11 SOUTH MERIDIAN
 INDIANAPOLIS, IN 46204
 UNITED STATES

TITLE

System for diagnosing reagent solution quality

FILING FEE RECEIVED 1878	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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